

CONJOINT COMMITTEE FOR RECOGNITION OF TRAINING IN GASTROINTESTINAL ENDOSCOPY

INFORMATION FOR TRAINING SUPERVISORS

Satisfactory training in endoscopy is recognised and recorded by the Conjoint Committee for Recognition of Training in Gastrointestinal Endoscopy. The Committee relies on supervisors to confirm that the trainee has independently performed at least the specified minimum number of procedures and has achieved a satisfactory level of competence.

The Committee recognises adequacy of training in gastroscopy, colonoscopy, endoscopic retrograde cholangiopancreatography and endoscopic ultrasound through documentation of procedures and satisfactory supervisors' reports. This recognition is increasingly being taken into account by hospitals when granting endoscopic privileges.

In the past, many endoscopists were self-taught with most of their training occurring in practice (on-the-job training). However, with an increasing emphasis on cost reduction and cost effectiveness in clinical practice, on-the-job training is no longer acceptable. Endoscopists now need to be trained to a higher level of skill. In this scenario, the training supervisor may be held accountable for the quality of training of endoscopists.

Previously, many trainees have thought that they only need to perform a certain number of procedures to be recognised by the Conjoint Committee. However, it should be clear that the Committee's principles for training emphasize cognitive and interpretive skills combined with a clear understanding of the role of endoscopy in patient management, including training in radiology and pathology findings as well as technical aspects of endoscopy, including sedation, cleaning and disinfection, fluoroscopy and sedation.

Recent literature on training in endoscopy has documented two important features

1. Trainees require more procedures than previously recommended to achieve competence.
2. More emphasis should be placed on assessing competence by documenting procedural success rates rather than the number of procedures performed.

These numbers represent a minimum and it is understood that some trainees will require more (never less) than the stated number to reach an acceptable level of expertise.

In line with the requirements in surgical training, trainees in endoscopy will be required to record sequentially and prospectively in a log book, each procedure attempted, whether successful or not together with details of the indications, time taken, complications occurring and success.

Trainees must have attended radiological and histopathological teaching sessions as well as related operations.

The assessment of competence is subjective; however, the logbook includes a column for calculation of success rate in blocks of 25 procedures to assist the supervisor.

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SUPERVISOR'S DETAILS

Name of Supervisor: _____

Supervisor's current recognition with the Conjoint Committee: (Please)

Upper GI Endoscopy	<input type="checkbox"/>	Paediatric Upper GI Endoscopy	<input type="checkbox"/>
Colonoscopy	<input type="checkbox"/>	Paediatric Colonoscopy	<input type="checkbox"/>
ERCP	<input type="checkbox"/>	EUS	<input type="checkbox"/>

Name of Applicant: _____

**Institution / Department
where training was
undertaken** _____

Period of supervision: From _____ **To:** _____

PERIOD APPLICANT ENGAGED IN COLONOSCOPY

During Advanced Training _____

**After completion of Advanced
Training** _____

NO OF PROCEDURES DONE BY THIS TRAINEE THAT YOU HAVE PERSONALLY SUPERVISED

Colonoscopy _____

Snare Polypectomy _____

